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## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 5392

|                             |  |              |                        |                                 |
|-----------------------------|--|--------------|------------------------|---------------------------------|
| SERIAL NUMBER<br>10/715,965 | FILING OR 371(c)<br>DATE<br>11/18/2003<br>RULE | CLASS<br>606 | GROUP ART UNIT<br>3732 | ATTORNEY<br>DOCKET NO.<br>F-294 |
|-----------------------------|--|--------------|------------------------|---------------------------------|

## APPLICANTS

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 Thomas N. Troxell, Pottstown, PA;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 10/001,531 11/30/2001 ABN *YES P.R.*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None P.R.*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/13/2004

|                                 |  |              |                    |
|---------------------------------|--|--------------|--------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  |              |                    |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |              |                    |
| Verified and Acknowledged       | Examiner's Signature <i>R.P.</i> Initials  |              |                    |
| STATE OR COUNTRY                | SHEETS DRAWING   | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| NJ                              | 4  | 19           | 2                  |

## ADDRESS

51640

## TITLE

Spacer device and insertion instrument for use in anterior cervical fixation surgery

|                            |   |   |
|----------------------------|---|---|
| FILING FEE RECEIVED<br>450 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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